

QUALITY CONTROL AND SURVEILLANCE RECORD FOR TOE MEDICAL ASSEMBLAGES

For use of this form, see AR 40-61; the proponent agency is OTSG

| NO | LOCATION | MANUFACTURER | CONTRACT NO. (If available) | LOT/BATCH NUMBER | EXP/MFR DATE (If available) | QTY ON HAND | DATE LAST INSPECTION | DATE NEXT INSPECTION |
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| NSN | | DESCRIPTION | | | UNIT OF ISSUE | NOTES | INSPECTION FREQUENCY | SHELF LIFE/ ESTIMATED SHELF LIFE |

DA FORM 4998-R, APR 1994

REPLACES DA FORM 4998-R, AUG 1981, WHICH IS OBSOLETE

APD LC v1.00